AMENDMENT TRANSMITTAL LETTER					Docket No. 5486-0125PUS1	
Application No. 10/809,088-Conf. #7665		Filing	I	Examiner	Art Uni	
		March 25, 2004 S. Memula		S. Memula	2825	
pplicant(s): Alex	cander TORON	IE				
vention: Setting	s and constrair	nts validation to	o enable des	ign for operations		
S AF ommissioner for O. Box 1450 exandria, VA 223	313-1450					
ransmitted here he fee has beer						
			S AS AMEN	DED		
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	17	- 20 =	0	x 50.00	0.00	
Independent Claims	3	- 4 =	0	x 210.00	0.00	
Multiple Depend	lent Claims (che	ck if applicabl	e)			
Other fee (pleas	e specify):					
TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:		0.00	
x Large Entity				Small Entity		
x No additiona	Il fee is require	d for this amer	idment.	_		
	ge Deposit Acc			n the amount of \$	<u> </u>	
A check in th	ne amount of \$		is enclo	sed.		
Payment by	credit card. Fo	orm PTO-2038	is attached.			
	is hereby auth I below. A dup			Deposit Account No. enclosed.	02-2448	
x Credit ar	ny overpaymen	t.				
X Charge a	any additional fili	•	_	ees required under 37 Dated:	CFR 1.16 and 1.17. August 6, 2008	
Michael K. Mutt Attorney Reg. N		<u>#47</u> ;	, 203	Dateu	August 6, 2006	
BIRCH, STEWA 8110 Gatehous		H & BIRCH, LL	.P			